

<b>CLAIMS ONLY</b>						SERIAL NO.		FILING DATE	
						APPLICANT(S)			
<b>CLAIMS</b>									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1	1						51		
2		1					52		
3		1					53		
4		1					54		
5		1					55		
6		1					56		
7		1					57		
8		1					58		
9		1					59		
10	1						60		
11	1						61		
12		1					62		
13		1					63		
14		1					64		
15		1					65		
16		1					66		
17		1					67		
18		1					68		
19		1					69		
20	1						70		
21	1						71		
22		1					72		
23		1					73		
24		1					74		
25		1					75		
26		1					76		
27		1					77		
28	1						78		
29	1						79		
30		1					80		
31							81		
32							82		
33							83		
34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	7						TOTAL IND.		
TOTAL DEP.	63	7	7	7	7	7	TOTAL DEP.		
TOTAL CLAIMS	30	7	7	7	7	7	TOTAL CLAIMS		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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